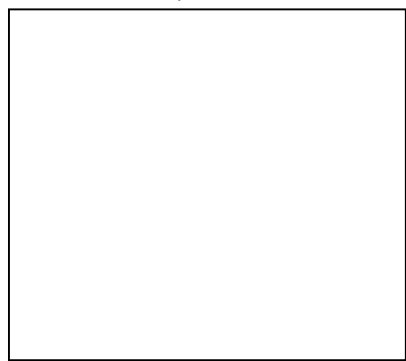




PHYSICAL ADDRESS: 3RD FLOOR ABSA TOWERS JOHANNESBURG, GAUTENG 2001, SOUTH AFRICA
 POSTAL ADDRESS: P.O.BOX 7735 JOHANNESBURG, GAUTENG PROVINCE, 2001 SOUTH AFRICA
 TELEPHONE : +27 78 405 5888
 FAX : +27 86 601 8108



Today, tomorrow, together.

OPENING FORM QUESTIONNAIRE FOR NON-RESIDENT ACCOUNT
 PAYMENT METHODS: (SELECT BY TICKING THE BOX "X")

Payment by Electronic Wire transfer Payment by ATM Card
 Payment by cheque

PASSPORT

BENEFICIARY'S PARTICULARS:

Surname:.....Other Names:.....Initials:.....
 Physical address:.....
 Contact Telephone:.....Mobile:.....Fax:.....
 Company/Profession:.....
 A copy of your Passport or ID:.....Marital Status:.....DOB:.....

BENEFICIARY'S BANK ACCOUNT (WHERE YOU WISH TO RECEIVE YOUR MONEY)

Bank Name:.....
 Bank Address:.....
 Account Name:..... Winning Amount.....
 Type of Account:.....Account Number:.....
 Branch Code:.....Swift Code:.....
 Next of Kin:.....Branch Name:.....

STATUS OF BENEFICIARY

Non-resident Temporary resident
 Resident

I/WE hereby apply to receive fund overseas subject to the following:

I/WE confirm that I/We am/are aware of the provision of the Exchange Control Regulations orders and rules, 1961 (as amended) *Note prescribed office Clearance Certificate from IMF will be applicable before the release*

Applicant's name:.....Authorized Signature:.....Date:.....

BANK USE ONLY

<p>Verification Completed</p> <p>By:.....Signature:.....</p> <p>Branch code:.....</p>	<p>Transaction authorized in terms of banking act of 1998 Republic of South Africa Section 11.</p> <p>Application /Account Nnumber:</p> <p>Opening Date:.....</p>
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